

Please refer to the Instructions for Filing Notification before completing this form. The information requested here is required by law (Section 3010 of the Resource Conservation and Recovery Act).



Notification of Regulated Waste Activity

United States Environmental Protection Agency

Date Received
(For Official Use Only)**I. Installation's EPA ID Number (Mark 'X' in the appropriate box)**☐

A. First Notification

☒B. Subsequent Notification
(Complete item C)**C. Installation's EPA ID Number**

V A D O 4 1 4 4 7 1 1 1

II. Name of Installation (Include company and specific site name)

I N D U S T R I A L M A R I N E S E R V I C E I N C

III. Location of Installation (Physical address not P.O. Box or Route Number)

Street

1 3 0 1 M A R S H S T R E E T

Street (Continued)

City or Town

N O R F O L K

State

Zip Code

V A

2 3 5 2 3 -

County Code

County Name

IV. Installation Mailing Address (See Instructions)

Street or P.O. Box

P O B 1 7 7 9

City or Town

N O R F O L K

State

Zip Code 0 1

V A

2 3 5 2 3 - 1 7 7 9

V. Installation Contact (Person to be contacted regarding waste activities at site)

Name (Last)

S E L F R I D G E

(First)

J A M E S F

Job Title

V P P L A N T S E R

Phone Number (Area Code and Number)

8 0 4 - 5 4 3 - 5 7 1 8

VI. Installation Contact Address (See Instructions)A. Contract Address
Location Mailing Other☐ ☒ ☐

B. Street or P.O. Box

S A M E

RECEIVED
GENERAL STATE SECTION

City or Town

State

Zip Code

JUL 15 1994

VII. Ownership (See Instructions)

A. Name of installation's Legal Owner

I N D U S T R I A L M A R I N E S E R V I C E I N C

Street, P.O. Box, or Route Number

P O B 1 7 7 9

City or Town

N O R F O L K

State

Zip Code

V A

2 3 5 0 1 - 1 7 7 9

Phone Number (Area Code and Number)

8 0 4 - 5 4 3 - 5 7 1 8

B. Land Type

P

C. Owner Type

P

D. Change of Owner Indicator

Yes

X

No

(Date Changed)

Month

Day

Year

ID - For Official Use Only

VIII. Type of Regulated Waste Activity (Mark 'X' in the appropriate boxes; Refer to Instructions)

A. Hazardous Waste Activity

1. Generator (See Instructions)
- ☒ a. Greater than 1000kg/mo (2,200 lbs.)
- ☐ b. 100 to 1000 kg/mo (200-2,200 lbs.)
- ☐ c. Less than 100 kg/mo (220 lbs)

2. Transporter (Indicate Mode in boxes 1-5 below)

- ☐ a. For own waste only
- ☒ b. For commercial purposes

Mode of Transportation

- ☐ 1. Air
- ☐ 2. Rail
- ☒ 3. Highway
- ☒ 4. Water
- ☐ 5. Other - specify

- ☐ 3. Treater, Storer, Disposer (at installation) Note: A permit is required for this activity; see Instructions.

4. Hazardous Waste Fuel

- ☐ a. Generator Marketing to Burner
- ☐ b. Other Marketers
- ☐ c. Boiler and/or Industrial Furnace

- ☐ 1. Smelter Deferral

- ☐ 2. Small Quantity Exemption
- Indicate Type of Combustion Device(s)

- ☐ 1. Utility Boiler
- ☐ 2. Industrial Boiler
- ☐ 3. Industrial Furnace

- ☐ 5. Underground Injection Control

B. Used Oil Recycling Activities

1. Used Oil Fuel Marketer

- ☐ a. Marketer Directs Shipment of Used Oil to Off-Specification Burner
- ☒ b. Marketer Who First Claims the Used Oil Meets the Specifications

2. Used Oil Burner - Indicate Type(s) of Combustion Device(s)

- ☒ a. Utility Boiler
- ☐ b. Industrial Boiler
- ☐ c. Industrial Furnace

3. Used Oil Transporter - Indicate Type(s) of Activity(ies)

- ☒ a. Transporter
- ☐ b. Transfer Facility

4. Used Oil Processor/Re-refiner - Indicate Type(s) of Activity(ies)

- ☐ a. Process
- ☐ b. Re-refine

IX. Description of Hazardous Wastes (Use additional sheets if necessary)

- A. Characteristics of Nonlisted Hazardous Wastes. (Mark 'X' in the boxes corresponding to the characteristics of nonlisted hazardous wastes your installation handles; See 40 CFR Parts 261.20 - 261.24)

1. Ignitable (D001) ☒ 2. Corrosive (D002) ☒ 3. Reactive (D003) ☒ 4. Toxicity Characteristic (List specific EPA hazardous waste number(s) for the Toxicity characteristic contaminant(s))
- ☒ ☒ ☒ ☒ D 0 1 8

- B. Listed Hazardous Wastes. (See 40 CFR 261.31 - 33; See instructions if you need to list more than 12 waste codes.)

1	2	3	4	5	6
7	8	9	10	11	12

- C. Other Wastes. (State or other wastes requiring a handler to have an I.D. number; See Instructions.)

1	2	3	4	5	6
F 0 0 2	F 0 0 3	F 0 0 4			

X. Certification

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Signature

Name and Official Title (Type or print)

James F. Selfridge VP Plant Svc

Date Signed

June 15, 1994

XI. Comments

Note: Mail completed form to the appropriate EPA Regional or State Office. (See Section III of the booklet for addresses.)

```

*****
*                               RCRIS: Notification View Screen 2 of 6                               *
*****
*EPA Id: VAD041447111      Other Id:                               Merge Send: Y                      *
*Date Received(MMDDYY): 081880      Source( N/E/S ): N Non-Notifier Flag:                      *
*Date Acknowledged (MMDDYYYY):                               Send Acknowledgement:              *
*Name of Installation: INDUSTRIAL MARINE SERVICE INC                      *
*                               Installation Location Address                      *
*Streets: 1301 MARSH STREET                      *
*City: NORFOLK                               State: VA      Zip: 23523                      *
*County Code: 710      County Name: NORFOLK                      *
*                               Installation Mailing Address                      *
*Streets: PO BOX 1779                      *
*City: NORFOLK                               State: VA      Zip: 23501                      *
*                               Contact Information                      *
*   Last Name      First Name      Title      Phone      Address(M,L,O) *
* PARKER          J.              H. PRES      8045435718      L                      *
*Streets: 1301 MARSH STREET                      *
*City: NORFOLK                               State: VA      Zip: 23523                      *
*Land Type:                      *
*****
* Enter-Continue      F1-Previous Screen      F3-Exit                      *
*****

```

```

*****
*                               RCRIS: Notification View Screen 3 of 6                               *
*****
* EPA Id: VAD041447111      Other Id:                               Source: N                      *
*                               *                               *                               *
* Owner Sequence Number: 1                               *
* Ownership: INDUSTRIAL MARINE SERVICE INC                      Type of Owner: P                      *
*                               *                               *                               *
*                               Address of Owner/Operator                      *
*                               *                               *                               *
*   Street: PO BOX 1779                      *
*   City: NORFOLK                               State: VA Zip Code 23501                      *
*   Phone: 8045435718                      *
*                               *                               *                               *
* Current/Previous Indicator: CO      Change Date(MMDDYY):                      *
*                               *                               *                               *

```

```

*****
* Enter-Continue      F1-Previous Screen      F3-Exit      F5-Curr. Owner *
* F6-Prev. Owner      F8-Help      F9-First      F10-Next      *
*****

```

```

*****
*                               RCRIS: Notification View Screen 4A of 6                               *
*****
* EPA Id: VAD041447111      Other Id:                               Source: N                      *
*                               *                               *                               *
*                               RCRA Reg      RCRA Reg      State Reg      State Reg      *
* Waste Activity      Type      Status      Desc      Status      Desc      *
* -----      -      -      -      -      -      *
* HW Generator:      2      N      4                      *
* HW TSD:      X      N      4                      *
* HW Transporter:      X      N      2                      *
* Transport Mode: Air:      Rail: X      Highway: X      Water: X                      *

```

```

*                               Other:
* HW Burner/Blender:
* NHW Used Oil Recycler:
* -----
* Underground Injection Control:
* Recycler:
*
*****
* Enter-Continue      F1-Previous Screen      F3-Exit      F8-Help
*****

*****
*                               RCRIS: Notification View Screen 5 of 6
*****
* EPA Id:  VAD041447111  Other Id:                               Source:  N
*
* Hazardous Waste Codes:  Specific/Non-Specific/Commercial/Chemical
*                        D000✓ D001✓ D002✓ D003✓ F002✓
*                        F003✓ F004✓ K049  K051  K052
*                        P110
*
*
*
*
*
*
*
*
*
*
*****
*Enter-Continue      F1-Previous Screen      F3-Exit
*F8-Help             F9-First                 F10-Next
*****

```

change contact + address, types + status,
Used Oil activities
Add waste code
Delete waste code

RESOURCE CONSERVATION AND RECOVERY INFORMATION SYSTEM
MAINTENANCE FORM FOR EPA NOTIFICATION

EPA-ID# 1V1A1D101411141417111111 Date: 7-26-94

FACILITY NAME Industrial Marine Service Inc.

New Facility Name

Name Change _____

Location of Installation

Street _____

City/Town _____ State _____ Zip _____

County Code _____ County Name _____

Installation Mailing Address

Street _____

City/Town _____ State _____ Zip _____

Installation Contact

Last Name Selfridge First James F.

Job Title VP Plant Ser Phone # _____

Street PO Box 1779

City/Town Norfolk State VA Zip 23523

Ownership

Name of Legal Owner _____

Street _____

City/Town _____ State _____ Zip _____

Phone # (____) _____ Land Type _____ Owner Type _____

Waste Codes

Delete Old Waste Codes

Add New Waste Codes

<u>K049</u>	<u>K052</u>	_____	<u>D018</u>	_____
<u>K051</u>	<u>P110</u>	_____	_____	_____
_____	_____	_____	_____	_____

Updated in RCRIS by H ST - RR Date 8-4-94 - 8-12-94

8-18-94

Waste Activity	Type	RCRA Reg. Status	RCRA Reg. Desc.
Generator	<u>1</u>	<u>B</u>	<u>Delete</u>
TSD	<u>C</u>	<u>R</u>	<u>Delete</u>
Transporter			

Mode of Transportation:

Air Rail Highway X Water X Other

Burner/Blender

B Boiler and/or Industrial Furnace (BIF) only.
 D BIF only; Smelter Deferral.
 E BIF only; Small Quantity Exemption claimed.
 N Not a Burner/Blender, Verified.
 X Other Burner/Blender Activity.
 Blank Unverified.

HWF Market to Burner

X Code indicates that the handler is a generator engaged in marketing to burners of hazardous waste fuel activities.

Blank No activity.

HWF Other Market

X Code indicates that the Handler is engaged in hazardous waste fuel marketing activities other than generator marketing to burner.

HWF Burner

B Boiler and/or Industrial Furnace.
 X Indication of activity.

OSO Market to Burner

X Code indicates that the handler is a generator engaged in marketing to burners of off-spec. used oil fuel.

OSO Other Market X

X Code indicates that the Handler is engaged in marketing of off-spec. used oil fuel other than generator marketing to burner (e.g., marketing to used oil refinery).

OSO Burner X

B Boiler and/or Industrial Furnace.
 X Indication of Activity.

SO ACT:

Code indicating that the handler is engaged in marketing of specification fuel oil activities.

B Boiler and/or Industrial Furnace.
 X Indication of Activity.

Burner Types

Utility Boiler 21 Industrial Boiler Ind. Furnace

Underground Injection Control

X Code indicates that the Handler generates and/or treats, stores, or disposes of hazardous waste and has an injection well located at the installation.

Recycler:

C Commercial
 R Non-Commercial Recycler
 N Not a Recycler, Verified
 Blank Not a recycler, unverified.

+K transporter +

```

*****
*                               RCRIS: Notification View Screen 4A of 6                               *
*****
* EPA Id:  MDD049548076      Other Id:                               Source:  N                               *
*
*
*                               RCRA Reg   RCRA Reg   State Reg   State Reg   *
* Waste Activity              Type    Status    Desc        Status    Desc        *
* -----
* HW Generator:
* HW TSD:
* HW Transporter:
*   Transport Mode:  Air:      Rail:      Highway:      Water:
*                   Other:
* HW Burner/Blender:
* NHW Used Oil Recycler:
* -----
* Underground Injection Control:
* Recycler:
*
*****
* Enter-Continue      F1-Previous Screen      F3-Exit      F8-Help      *
*****

*****
*                               RCRIS: Notification View Screen 4B of 6                               *
*****
* EPA Id:  MDD049548076      Other Id:                               Source:  N                               *
*
* HWF Burner/Blender (from 4A):      Enter Sub-Indicator(s) if Type not Blank      *
*   Type:                            HWF Marketer to Burner:
*   RCRA Reg Stat:                   HWF Other Marketer:
*   RCRA Reg Desc:                   HWF Burner:
*   State Reg Stat:
*   State Reg Desc:
* NHW Used Oil Recycler (from 4A):      UO Marketer to Burner:
*   Type:                            Specification UO Marketer: X ←
*   RCRA Reg Stat:                   UOF Burner: X
*   State Reg Stat:                   UO Transporter: T ←
*   State Reg Desc:                   UO Processor/Re-refiner:
*                                   UO Collection Center:
*
* Burner
* Type:  Utility Boiler: 21 Industrial Boiler:      Industrial Furnace:
*
*****
* Enter-Continue      F1-Prev Screen      F3-Exit      F8-Help      *
*****

```

**HAZARDOUS WASTE DATA MANAGEMENT SYSTEM
MAINTENANCE FORM FOR NOTIFICATION**

Asw *Duke*
750-7506

EPA-ID # Y1A1DQ41L1Y412111111 Date: 5-30-90

FACILITY NAME Industrial marine Service Inc.

New Facility Name _____

Contact Person/Position _____

PARKER J. H. Pres. () -
(Last, First, M) Title Tel No

MAILING ADDRESS Street _____
City _____ State _____ Zip _____

LOCATION ADDRESS Street _____
City _____ State _____ Zip _____

County Name _____ County Code _____

Owner Name _____ Operator Name _____

→ Activity Code
2. Gen ☒ Tr ☐ Ted
5. Market or Burn HWF
A. Gen Mark to Burn
B. Other Marketer
C. Burner

Used Oil Fuel Activities
6. Off-Spec Used Oil Fuel
A. Gen Mark to Burn
B. Other Marketer
C. Burner
7. Spec Used Oil Fuel Mark

Waste Fuel Burning: Type of Combustion Device
Utility Boiler Ind. Boiler Ind. Furnace

Mode of Transportation (Transporters Only)
Air Rail Highway Water Other

Maintenance Screens

<u>W1 Card</u>		<u>W2 Card</u>	
Existing Waste Code		New Waste Code	Non-Reg Ind. (e303)
-----	-----	EC02	-----
-----	-----	EC03	-----
-----	-----	EC04	-----

United States Environmental Protection Agency
Washington, DC 20460

Notification of Hazardous Waste Activity

Please refer to the Instructions for Filing Notification before completing this form. The information requested here is required by law (Section 3010 of the Resource Conservation and Recovery Act).

For Official Use Only

Comments

C
C

Installation's EPA ID Number

Approved

Date Received
(yr. mo. day)C
F

T/A C

V A D O 4 1 4 4 7 1 1 1

1

I. Name of Installation

INDUSTRIAL MARINE SERVICE

II. Installation Mailing Address

Street or P.O. Box

C
3

P O B 1 7 7 9

City or Town

State

ZIP Code

C
4

N O R F O L K

V A 2 3 5 0 1

III. Location of Installation

Street or Route Number

C
5

1 3 0 1 M A R S H S T R E E T

City or Town

State

ZIP Code

C
6

N O R F O L K

V A 2 3 5 2 3

IV. Installation Contact

Name and Title (last, first, and job title)

Phone Number (area code and number)

C
2

J H P A R K E R P R E S

8 0 4 5 4 3 5 7 1 8

V. Ownership

A. Name of Installation's Legal Owner

B. Type of Ownership (enter code)

C
R

I N D U S T R I A L M A R I N E S E R V I C E C O R P .

VI. Type of Regulated Waste Activity (Mark 'X' in the appropriate boxes. Refer to instructions.)

A. Hazardous Waste Activity

B. Used Oil Fuel Activities

- ☒ 1a. Generator ☒ 1b. Less than 1,000 kg/mo.
☒ 2. Transporter
☐ 3. Treater/Storer/Disposer
☐ 4. Underground Injection
☐ 5. Market or Burn Hazardous Waste Fuel
(enter 'X' and mark appropriate boxes below)
☐ a. Generator Marketing to Burner
☐ b. Other Marketer
☐ c. Burner

- ☒ 6. Off-Specification Used Oil Fuel
(enter 'X' and mark appropriate boxes below)
☐ a. Generator Marketing to Burner
☒ b. Other Marketer
☒ c. Burner
☒ 7. Specification Used Oil Fuel Marketer (or On site Burner)
Who First Claims the Oil Meets the Specification

VII. Waste Fuel Burning: Type of Combustion Device (enter 'X' in all appropriate boxes to indicate type of combustion device(s) in which hazardous waste fuel or off-specification used oil fuel is burned. See instructions for definitions of combustion devices.)

☐ A. Utility Boiler☒ B. Industrial Boiler☐ C. Industrial Furnace

VIII. Mode of Transportation (transporters only — enter 'X' in the appropriate box(es))

- ☐ A. Air ☐ B. Rail ☒ C. Highway ☒ D. Water ☐ E. Other (specify)

IX. First or Subsequent Notification

Mark 'X' in the appropriate box to indicate whether this is your installation's first notification of hazardous waste activity or a subsequent notification. If this is not your first notification, enter your installation's EPA ID Number in the space provided below.

- ☐ A. First Notification ☒ B. Subsequent Notification (complete item C)

C. Installation's EPA ID Number

V A D O 4 1 4 4 7 1 1 1

ID — For Official Use Only												
C											T/A	C
W												1

X. Description of Hazardous Wastes (continued from front)

A. Hazardous Wastes from Nonspecific Sources. Enter the four-digit number from 40 CFR Part 261.31 for each listed hazardous waste from nonspecific sources your installation handles. Use additional sheets if necessary.

1	2	3	4	5	6
F O O 2	F 0 0 3	F O O 4			
7	8	9	10	11	12

B. Hazardous Wastes from Specific Sources. Enter the four-digit number from 40 CFR Part 261.32 for each listed hazardous waste from specific sources your installation handles. Use additional sheets if necessary.

13	14	15	16	17	18
19	20	21	22	23	24
25	26	27	28	29	30

C. Commercial Chemical Product Hazardous Wastes. Enter the four-digit number from 40 CFR Part 261.33 for each chemical substance your installation handles which may be a hazardous waste. Use additional sheets if necessary.

31	32	33	34	35	36
37	38	39	40	41	42
43	44	45	46	47	48

D. Listed Infectious Wastes. Enter the four-digit number from 40 CFR Part 261.34 for each hazardous waste from hospitals, veterinary hospitals, or medical and research laboratories your installation handles. Use additional sheets if necessary.

49	50	51	52	53	54

E. Characteristics of Nonlisted Hazardous Wastes. Mark 'X' in the boxes corresponding to the characteristics of nonlisted hazardous wastes your installation handles. (See 40 CFR Parts 261.21 — 261.24)

☒ 1. Ignitable
(D001)


☒ 2. Corrosive
(D002)

☒ 3. Reactive
(D003)

☒ 4. Toxic
(D000)

XI. Certification

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

Signature 	Name and Official Title (type or print) J.H. Parker, President	Date Signed 02/26/90
--	---	-------------------------



COMMONWEALTH of VIRGINIA

Department of Health
Richmond, Va. 23219

JAMES B. KENLEY, M.D.
COMMISSIONER

January 3, 1984

CERTIFIED RETURN
RECEIPT REQUESTED

John N. Burton, Jr.
Industrial Marine Services, Inc.
P.O. Box 1779
Norfolk, VA 23501

Re: USEPA's Recommendations to Terminate Interim Status
Facility Name: Industrial Marine Service, Inc.
EPA ID Number: VAD041447111

Dear Mr. Burton:

The U.S. EPA has sent you a letter dated September 30, 1983 which included a recommendation to the Commonwealth of Virginia for the termination of interim status for your facility.

In past verbal or written communications you had indicated that your facility has never stored hazardous waste. In order to arrive at a final decision with respect to your permit application, please submit a letter to the Bureau of Hazardous Waste Management indicating that to date you have never stored hazardous waste at the above named facility. Receipt of this letter would enable us to terminate interim status for your facility in compliance with the Virginia Hazardous Waste Management Regulations.

If you have any questions, please contact Julia King-Collins at the letterhead address or by calling at (804) 786-6327.

Sincerely,

William F. Gilley, P.E., Director
Division of Solid and Hazardous
Waste Management

WFG/SIC/sm

cc: Stephen R. Wassersug



**ACKNOWLEDGEMENT OF NOTIFICATION
OF HAZARDOUS WASTE ACTIVITY
(VERIFICATION)**

This is to acknowledge that you have filed a Notification of Hazardous Waste Activity for the installation located at the address shown in the box below to comply with Section 3010 of the Resource Conservation and Recovery Act (RCRA). Your EPA Identification Number for that installation appears in the box below. The EPA Identification Number must be included on all shipping manifests for transporting hazardous wastes; on all Annual Reports that generators of hazardous waste, and owners and operators of hazardous waste treatment, storage and disposal facilities must file with EPA; on all applications for a Federal Hazardous Waste Permit; and other hazardous waste management reports and documents required under Subtitle C of RCRA.

EPA I.D. NUMBER

• VAD041447111

INSTALLATION ADDRESS

INDUSTRIAL MARINE SERVICE IND
PO BOX 1779
NORFOLK VA 23501

1301 MARSH STREET
NORFOLK VA 23523

U.S. ENVIRONMENTAL PROTECTION AGENCY
NOTIFICATION OF HAZARDOUS WASTE ACTIVITY

INSTRUCTIONS: If you received a preprinted label, affix it in the space at left. If any of the information on the label is incorrect, draw a line through it and supply the correct information in the appropriate section below. If the label is complete and correct, leave Items I, II, and III below blank. If you did not receive a preprinted label, complete all items. "Installation" means a single site where hazardous waste is generated, treated, stored and/or disposed of, or a transporter's principal place of business. Please refer to the INSTRUCTIONS FOR FILING NOTIFICATION before completing this form. The information requested herein is required by law (Section 3010 of the Resource Conservation and Recovery Act).

RECEIVED

INSTALLATION'S EPA I.D. NO.

I. NAME OF INSTALLATION

INDUSTRIAL MARINE SERVICE, INC.

PO Box 1779,

Norfolk, Virginia 23501

PLEASE PLACE LABEL IN THIS SPACE

II. INSTALLATION MAILING ADDRESS

1301 Marsh Street,

Norfolk, Virginia

III. LOCATION OF INSTALLATION

FOR OFFICIAL USE ONLY

COMMENTS

EPA REGION III

AUG 18 1980

INSTALLATION'S EPA I.D. NUMBER

APPROVED

DATE RECEIVED (yr., mo., & day)

VAD04144711121

800818

I. NAME OF INSTALLATION

INDUSTRIAL MARINE SERVICE INC

II. INSTALLATION MAILING ADDRESS

STREET OR P.O. BOX

3 PO BOX 1779

CITY OR TOWN

4 NORFOLK

ST.

ZIP CODE

VA 23501

III. LOCATION OF INSTALLATION

STREET OR ROUTE NUMBER

51301 MARSH STREET

CITY OR TOWN

6 NORFOLK

ST.

ZIP CODE

VA 23523

IV. INSTALLATION CONTACT

NAME AND TITLE (last, first, & job title)

PHONE NO. (area code & no.)

2 BURTON JR JOHN

804-543-5718

V. OWNERSHIP

A. NAME OF INSTALLATION'S LEGAL OWNER

8 INDUSTRIAL MARINE SERVICE INC

B. TYPE OF OWNERSHIP (enter the appropriate letter into box)

VI. TYPE OF HAZARDOUS WASTE ACTIVITY (enter "X" in the appropriate box(es))

F = FEDERAL
M = NON-FEDERAL

M

☒ A. GENERATION☒ B. TRANSPORTATION (complete item VII)☒ C. TREAT/STORE/DISPOSE☐ D. UNDERGROUND INJECTION

VII. MODE OF TRANSPORTATION (transporters only - enter "X" in the appropriate box(es))

☐ A. AIR☒ B. RAIL☒ C. HIGHWAY☒ D. WATER☐ E. OTHER (specify):

VIII. FIRST OR SUBSEQUENT NOTIFICATION

Mark "X" in the appropriate box to indicate whether this is your installation's first notification of hazardous waste activity or a subsequent notification. If this is not your first notification, enter your Installation's EPA I.D. Number in the space provided below.

☒ A. FIRST NOTIFICATION☐ B. SUBSEQUENT NOTIFICATION (complete item C)

C. INSTALLATION'S EPA I.D. NO.

IX. DESCRIPTION OF HAZARDOUS WASTES

Please go to the reverse of this form and provide the requested information.

IX. DESCRIPTION OF HAZARDOUS WASTES (continued from front)

A. HAZARDOUS WASTES FROM NON-SPECIFIC SOURCES. Enter the four-digit number from 40 CFR Part 261.31 for each listed hazardous waste from non-specific sources your installation handles. Use additional sheets if necessary.

1	2	3	4	5	6
23 - 26	23 - 26	23 - 26	23 - 26	23 - 26	23 - 26
7	8	9	10	11	12
23 - 26	23 - 26	23 - 26	23 - 26	23 - 26	23 - 26

B. HAZARDOUS WASTES FROM SPECIFIC SOURCES. Enter the four-digit number from 40 CFR Part 261.32 for each listed hazardous waste from specific industrial sources your installation handles. Use additional sheets if necessary.

13	14	15	16	17	18
K051					
23 - 26	23 - 26	23 - 26	23 - 26	23 - 26	23 - 26
19	20	21	22	23	24
K052					
23 - 26	23 - 26	23 - 26	23 - 26	23 - 26	23 - 26
25	26	27	28	29	30
D001					
23 - 26	23 - 26	23 - 26	23 - 26	23 - 26	23 - 26

C. COMMERCIAL CHEMICAL PRODUCT HAZARDOUS WASTES. Enter the four-digit number from 40 CFR Part 261.33 for each chemical substance your installation handles which may be a hazardous waste. Use additional sheets if necessary.

31	32	33	34	35	36
P110					
23 - 26	23 - 26	23 - 26	23 - 26	23 - 26	23 - 26
37	38	39	40	41	42
D001					
23 - 26	23 - 26	23 - 26	23 - 26	23 - 26	23 - 26
43	44	45	46	47	48
23 - 26	23 - 26	23 - 26	23 - 26	23 - 26	23 - 26

D. LISTED INFECTIOUS WASTES. Enter the four-digit number from 40 CFR Part 261.34 for each listed hazardous waste from hospitals, veterinary hospitals, medical and research laboratories your installation handles. Use additional sheets if necessary.

49	50	51	52	53	54
23 - 26	23 - 26	23 - 26	23 - 26	23 - 26	23 - 26

E. CHARACTERISTICS OF NON-LISTED HAZARDOUS WASTES. Mark "X" in the boxes corresponding to the characteristics of non-listed hazardous wastes your installation handles. (See 40 CFR Parts 261.21 - 261.24.)

☒ 1. IGNITABLE
(D001)

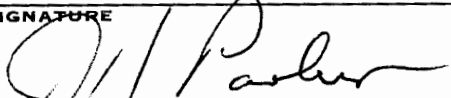
☒ 2. CORROSIVE
(D002)

☒ 3. REACTIVE
(D003)

☒ 4. TOXIC
(D000)

X. CERTIFICATION

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

SIGNATURE 	NAME & OFFICIAL TITLE (type or print) Pres.	DATE SIGNED 8/15/80
--	--	------------------------

NOTICE

FACILITY NAME: Industrial Marine Service Inc.

EPA ID NUMBER: VAP 041447111

PRESENT C1105 CODE: 7

PRESENT C305 CODE: 5

CORRECT C1105 CODE: 7

CORRECT C305 CODE: blank

The current status of the above facility is:

- ☒ Certified Closure
- ☐ State confirms facility is not a TSD facility
- ☐ State confirms facility is less than 90 day storage
- ☐ Closure not necessary
- ☐ Facility converted to Generator status w/o full closure
- ☐ Facility is a Transporter

ADDITIONAL INFORMATION ON THE STATUS OF THIS FACILITY:

Jennifer Luri
Signature of Reviewer

7/20/88
Date

**COMMONWEALTH of VIRGINIA**

Department of Health
Richmond, Va. 23219

JAMES B. KENLEY, M.D.
COMMISSIONER

MAR 29 1985

CERTIFIED RETURN
RECEIPT REQUESTED

George C. Walton
Industrial Marine Service, Inc.
1301 Marsh Street
Norfolk, Virginia 23501

Dear Mr. Walton:

On March 20, 1984, the State Health Commissioner signed the Notice of Termination of Interim Status for Industrial Marine Service, Inc., 1301 Marsh Street, Norfolk, Virginia, EPA ID #VAD041447111. This constituted the final administrative action under Section 11.03 of the Virginia Hazardous Waste Management Regulations (VHWMR). By this action, the above facility is prohibited from operating as a hazardous waste management facility.

On February 28, 1985, the facility was visited by Renee C. Tyson, a representative from the Bureau of Hazardous Waste Management. The inspection and required certification received by the Bureau on March 8, 1984, from Mr. John N. Burton, Jr., show that closure had been performed in accordance with our regulations. Therefore, in accordance with Section 9.08.03(h) of VHWMR, you are hereby notified that financial assurance for closure of the facility no longer is required. Please note, however, that the Environmental Protection Agency retains the authority to address possible corrective action of continuing releases pursuant to the Hazardous and Solid Waste Amendments of 1984.

If you decide in the future to operate a hazardous waste management facility at this site, you should submit Part A and Part B of the permit application and receive a final permit before any facility construction begins (see Section 11.02.05 of the VHWMR).

If you have any questions, please contact Renee C. Tyson at (804) 225-2667.

Sincerely,

A handwritten signature in dark ink, appearing to read "V. Gulevich".

Vladimir Gulevich, Ph.D., P.E., Director
Bureau of Hazardous Waste Management

WG/RCT1:457/d1a

April 5, 1985

Dr. Wladimir Gulevich, Director
Bureau of Hazardous Waste Management
Virginia Department of Health
11th Floor Monroe Bldg.
101 North 14th Street
Richmond, VA 23219

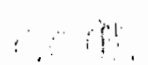
Dear Dr. Gulevich:

We have received your letter of March 29, 1985, terminating Interim Status for the storage facility formerly operated by IMS.

Please note, however, that IMS will continue to operate as a Transporter with Virginia permit number VAD041447115 and corresponding EPA number and may, from time to time, generate hazardous waste.

Sincerely,

Industrial Marine Service, Inc.


George C. Walton
Technical Director

GCW/djc

CLOSURE TRACKING CHART

1/84

Facility Name: Industrial Marine Service, Inc.Facility EPA ID #: VAD 041447111

1. Date of notice of termination of interim status 3/20/84
PROCESSED
2. Closure plan requested
Closure plan received
Modification/clarification requested
Modification/clarification received
3. Date of Public Notice
Modification/clarification requested
Modification/clarification received
4. Date of Closure plan approval
5. Owner certification received March 10, 1984
6. P.E. certification received
7. Closure inspection(s)
8. Is post-closure required?
If yes, see Section 9.07.07
9. Release Letter



COMMONWEALTH of VIRGINIA

Department of Health
Richmond, Va. 23219

JAMES B. KENLEY, M.D.
COMMISSIONER

March 20, 1984

John Burton, Jr.
Industrial Marine Service, Inc.
P. O. Box 1779
1301 Marsh Street
Norfolk, Virginia 23501

Dear Mr. Burton:

This letter is notification of change in RCRA administration in the Commonwealth of Virginia and of final administrative disposition of termination of interim status for storage at your facility located in Norfolk, Virginia (VAD041447111).

On August 18, 1983, the Commonwealth of Virginia received authorization from EPA for RCRA Phase II, Components A and B. This gives the Commonwealth the authority to issue/deny permits and terminate interim status for hazardous waste facilities located in Virginia which incinerate or store and/or treat in containers and tanks. Therefore, the Commonwealth of Virginia, and not EPA, is taking final action for this facility.

A September 30, 1983 letter from EPA notified you that it was recommending that the Commonwealth terminate interim status for your facility. This action was in response to your November 19, 1982 letter to EPA stating that you would not be seeking a permit for this location. In order to complete the administrative record for this facility, EPA proposed to terminate interim status in accordance with the regulations in 40 C.F.R. Parts 270.10(e)(5) and 270.73.

On July 21, 1983, a Public Notice of Intent to Terminate Interim Status of the Industrial Marine Service, Inc. facility under RCRA was published by EPA. No pertinent comments or requests for a hearing were received during the public comment period which ended September 19, 1983.

The Commonwealth of Virginia is hereby completing the administrative action initiated by EPA. Enclosed is the Notice of Termination of Interim Status for this facility (VAD041447111). This notification constitutes final action under Section 11.00 of the Virginia Hazardous Waste Management Regulations.

*Copy 1
235-111
1-84*

John Burton, Jr.
March 20, 1984
Page 2

If you have any questions regarding this notice, please contact William F. Gilley, (804) 225-2667.

Sincerely,

James B. Kenley, M.D.
State Health Commissioner

Enclosure

NOTICE OF TERMINATION OF INTERIM STATUS

Name and Address of Applicant:

John Burton, Jr.
Industrial Marine Service, Inc.
P.O. Box 1779
1301 Marsh Street
Norfolk, Virginia 23501

Name and Address of Facility:

Same as Above

EPA I.D. No.: VAD041447111

Description of Facility and Action: The above facility has, since November 19, 1980, operated a hazardous waste management facility subject to regulations promulgated under the Resource Conservation and Recovery Act. This facility qualified for interim status, which is conferred by the Act and allows a facility to operate until final disposition of its permit application. By letters of November 19, 1982 and March 1, 1984, the facility indicated that it would no longer operate as a hazardous waste management facility, so a permit would not be sought. EPA published a Notice of Intent to Terminate Interim Status and provided the opportunity for a hearing. The public comment period began on July 21 and ended September 19, 1983. During that period, no pertinent comments or requests for hearing were received.

On August 18, 1983, the Commonwealth of Virginia received authorization from EPA for RCRA Phase II, Components A and B. This gives the Commonwealth the authority to issue/deny permits and terminate interim status for hazardous waste facilities located in Virginia which incinerate or store and/or treat in containers and tanks. Therefore, the Commonwealth of Virginia, and not EPA, is taking the final administrative action for this facility.

The action finalized by this notice is the termination of interim status for this facility by authority of regulation 40 C.F.R. §270.10 (e)(5) and 270.73, and Section 11.03 of the Virginia Hazardous Waste Management Regulations. Upon termination of interim status, the facility is prohibited from operating as a hazardous waste management facility.

James B. Kenley, M.D.
State Health Commissioner

SEP 30 1983

NOTICE OF RECOMMENDATION TO TERMINATE INTERIM STATUS

Office Issuing This Notice:

U.S. Environmental Protection Agency
Region III
6th & Walnut Streets
Philadelphia, PA 19106

Name and Address of Permittee:

Mr. John N. Burton, Jr.
Industrial Marine Service, Inc.
P.O. Box 1779
Norfolk, VA 23501

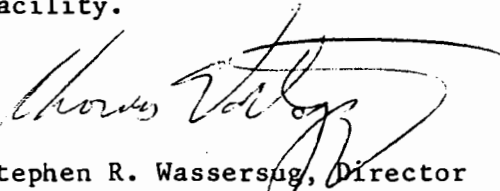
Name and Address of Facility:

Industrial Marine Service, Inc.
1301 Marsh Street
Norfolk, VA 23523

EPA I.D. No.

VAD 04 144 7111

Description of Facility and Action: The above facility has, since November 19, 1980, operated a hazardous waste management facility subject to regulations promulgated under the Resource Conservation and Recovery Act. This facility qualified for interim status, which is conferred by the Act and allows a facility to operate until final disposition of its permit application. On March 18, 1982, EPA requested from this facility its complete permit application. By letter of November 19, 1982, the facility indicated that it would no longer operate as a hazardous waste management facility so would not be submitting the permit application. EPA followed the Public Notification procedures outlined in 40 C.F.R. Part 124 in taking this action. No public comments were received during the public comment period. In the interim, however, the State of Virginia received delegation for permitting of storage and incineration facilities. Therefore, the action finalized by this notice is a recommendation to the State of Virginia for the termination of interim status for this facility. Final termination will occur upon official notification by Virginia. Upon termination of interim status, this facility is prohibited from operating as a hazardous waste management facility.


Stephen R. Wassersug, Director
Air & Waste Management Division

CONCURRENCES

SYMBOL	3AW32	3AW30	3RC20	3AW00				
SURNAME	SODOLOWSKI	CUNNINGHAM	COLLINGS	WASSERSUG				
DATE	9/29/83	9/29/83	9/29/83					

EPA Form 1320-1 (12/70)

OFFICIAL FILE COPY



UNITED STATES ENVIRONMENTAL PROTECTION AGENCY

REGION III

6TH AND WALNUT STREETS
PHILADELPHIA, PENNSYLVANIA 19106

CERTIFIED MAIL
RETURN RECEIPT REQUESTED

SEP 30 1983

Mr. John N. Burton, Jr.
Industrial Marine Service, Inc.
P.O. Box 1779
Norfolk, VA 23501

Re: Recommendation to Terminate Interim Status
Facility Name: Industrial Marine Service, Inc.
EPA I.D. Number: VAD 04 144 7111

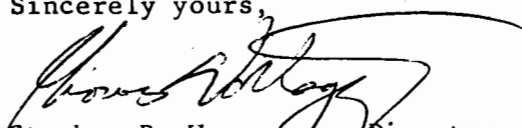
Dear Mr. Burton:

Enclosed is a recommendation to the State of Virginia for the termination of interim status for the above referenced facility. This action is in accordance with your request to withdraw the Part A application and to terminate the interim status of your facility. Under normal Federal procedures, EPA at this time would have notified you of termination of your interim status. However, since the time of the public notice, the State of Virginia has been delegated the permit program for storage and incineration facilities. Therefore, this notification constitutes a recommendation to Virginia for a final permit decision. You should receive such notice from Virginia shortly.

The decision to terminate interim status when issued by Virginia would not relieve you of your responsibilities for closure of the facility. If closure is required, the administrative procedures for closure must begin immediately.

Your Part A application is enclosed if it was not previously returned to you. If you have any questions regarding this notification or your responsibilities under RCRA, please contact Ms. Joan Henry at the letterhead address or you may telephone her at (215) 597-8751.

Sincerely yours,


Stephen R. Wassersug, Director
Air & Waste Management Division

Enclosure

cc: Walter Gulevich, VA

CONCURRENCES

SYMBOL	3AW32	3RC20	3AW00				
SURNAME	SOKOLOWSKI	CUMMINGHAM	CUMMINGS	WASSERSUG			
DATE	9/30	9/30	9/30				

EPA Form 1320-1 (12-70) 23

OFFICIAL FILE COPY



11/24/82
RCRA Compliance DOD

INDUSTRIAL MARINE SERVICE, INC.

PLANT: 1301 MARSH STREET / NORFOLK, VIRGINIA
MAIL: P. O. BOX 1779 / NORFOLK, VIRGINIA 23501

TELEPHONE
(804) 543-5718

MEMBER: Norfolk Chamber of Commerce / Hampton Roads Maritime Assoc. / National Fire Protection Assoc.
Spill Control Association of America / National Safety Council
A CLEAN VENTURE Company

November 19, 1982

United States Environmental
Protection Agency
Region III
6th and Walnut Streets
Philadelphia, PA 19106

Re: Notice of Violation No. III-83-3-VR
Industrial Marine Service, Inc.
1301 Marsh Street
Norfolk, Virginia
EPA I.D. No. VAD 041447111

Attn: Mr. Ralph W. Siskind, Office of Regional Counsel

Dear Mr. Siskind:

Regarding our telephone conversation of November 15, 1982, concerning our not having submitted Part B for a Hazardous Waste Management Facility permit, we are providing information clarifying our situation.

As we explained to you over the telephone, we are an oil spill and hazardous waste cleanup company and do not generate, store or treat any hazardous waste at our plant. We applied for a TSDF permit because we did not know at the time the method of handling material which might be cleaned from a spill. It was not clear whether we would have to transport the material to our plant for storage until such time as samples were taken, mailed to the facility, or whether the material could be transported directly from the spill site to the facility. Should the former be necessary, a time delay of two to three weeks might have been required and storage necessary.

When the time arrived to file our Part B application, we determined that we could transport the material direct from the site to a TSDF since in most cases the spill would involve a virgin material of known ingredients. An analysis would then be made for additional contamination. Since we are not a Generator, do not store or treat material on our property, we do not require a facility permit. We therefore did not file Part B. We spoke with a representative of Ms. Shirley Bulkin's office and informed him that we would not file, but failed to follow up with a confirming letter. We also notified Ms. Sandra L. Morse and Mr. Mohammad R. Habibi of the Virginia Division of Solid and Hazardous Waste Management when they surveyed our facility on June 16, 1982.

4/7/83 - coded 33


United States Environmental
Protection Agency
November 19, 1982
Page 2

We do wish to retain our EPA number because we have a number from the State of Virginia as a Hazardous Waste Transporter. This is for use on spills should we be required to transport a material from a spill site.

We apologize for any inconvenience we have caused you for failure to properly notify you of our intention and thank you for resolving this matter for us.

Very truly yours,

Industrial Marine Service, Inc.


John N. Burton, Jr.
Vice President

JNB/djz



INDUSTRIAL MARINE SERVICE, INC.

PLANT: 1301 MARSH STREET / NORFOLK, VIRGINIA
MAIL: P. O. BOX 1779 / NORFOLK, VIRGINIA 23501

TELEPHONE
(804) 543-5718

MEMBER: Norfolk Chamber of Commerce / Hampton Roads Maritime Assoc. / National Fire Protection Assoc.
Spill Control Association of America / National Safety Council
A CLEAN VENTURE Company

August 10, 1983

U.S. Environmental Protection Agency
Director, Air & Waste Management Division (3AW22)
6th & Walnut Streets
Philadelphia, PA 19106

Attn: Henry Skolowski (3AW32)

Gentlemen:

We respond to your Notice of Intent to Terminate Interim
Status of July 21, 1983

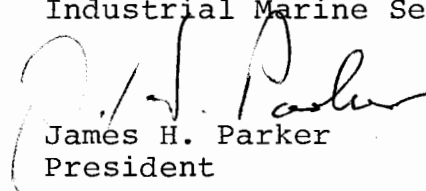
It is our understanding that we have requested only a partial
termination and that:

- (1) We will retain our EPA I.D. VAD041447111 as a
Generator and Transporter.
- (2) Should we later determine that we need to be a
TSDF we may reapply without prejudice.

We will appreciate your advice that these understandings
are correct.

Very truly yours,

Industrial Marine Service, Inc.


James H. Parker
President

JHP/djz

*8/15/83. Called Mr. Parker & discussed him that his
facility will remain a generator & transporter & I explained
the process of becoming a TSDF facility in the future from*



NOTICE OF INTENT TO TERMINATE INTERIM STATUS

7/21/83

Office Issuing This Notice:

U.S. Environmental Protection Agency
Region III
6th & Walnut Streets
Philadelphia, Pennsylvania 19106
ATTN: (3AW32)

Name and Address of Permittee:

Industrial Marine Services Inc.
P.O. Box 1779
Norfolk, VA 23501

Name and Address of Facility:

Industrial Marine Services Inc.
1301 Marsh Street
Norfolk, VA 23523

EPA I.D. No.

VAD041447111

Description of Facility and Proposed Action: The above facility has, since November 19, 1980, operated a hazardous waste management facility subject to regulations promulgated under the Resource Conservation and Recovery Act. This facility qualified for interim status, which is conferred by the Act and allows a facility to operate until final disposition of its permit application. On March 18, 1982 EPA requested from this facility its complete permit application. By letter of November 19, 1982 the facility indicated that it would no longer operate as a hazardous waste management facility so would not be submitting the permit application. The action proposed by this notice is the termination of interim status for this facility by authority of regulation 40 C.F.R. §§ 270.10(e)(5) and 270.73. Upon termination of interim status, this facility is prohibited from operating as a hazardous waste management facility.

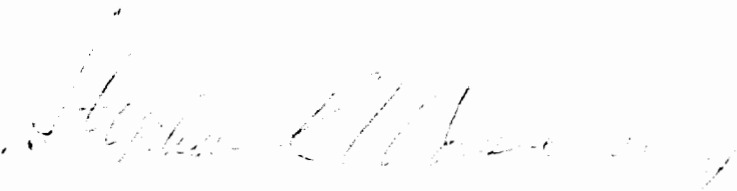
Availability of Information: All data submitted by the applicant and all related information is available as part of the administrative record. It may be inspected and arrangements made for copying at the EPA offices at the above address at any time between 9:00 A.M. and 4:00 P.M., Monday through Friday. For further information please contact Shirley Bulkin at (215) 597-4269.

Procedures for Public Participation: On the basis of its review of this facility's permit file, EPA proposes to terminate the facility's interim status. Persons wishing to comment on this proposed action are invited to submit a statement to the Director of the Air and Waste Management Division within 60 days from the date of this notice. All comments should include the name, address and telephone number of the writer and a concise statement of the basis of the comments and the facts upon which it is based. The comments may include a request for a public hearing on the proposed action and the nature of the issues proposed to be raised. If these comments relating to termination of interim status include a request for a public hearing, one will be held on this proposed action.

All comments received will be considered in the formulation of the final action in this matter. EPA's final action in this matter is subject to review under the evidentiary hearing procedures in 40 C.F.R. Part 124, Subpart E.

Address Comments To:

U.S. Environmental Protection Agency
Director, Air & Waste Management Division (3AW22)
6th & Walnut Streets
Philadelphia, Pennsylvania 19106
ATTN: Henry Sokolowski (3AW32)



Stephen R. Wassersug, Director
Air & Waste Management Division

REQUEST FOR WITHDRAWAL FROM INTERIM STATUS

FACILITY NAME Industrial Marine Service Inc

FACILITY I.D. NO. VAD 04 144 7111

CHECKLIST

- Part B Called In?
NA Submit closure plan for review?
NA Go through proper closure/post closure
NA Approved?
NA Claims corroborated by State/EPA inspection?
 Additional future inspections required?

WITHDRAWAL APPROVED

Harry Weber
Signature

Date

1/21/83



UNITED STATES ENVIRONMENTAL PROTECTION AGENCY

REGION III

6TH AND WALNUT STREETS
PHILADELPHIA, PENNSYLVANIA 19106

JUL 30 198

Mr. J. N. Burton, Jr.
Industrial Marine Service Inc.
P.O. Box 1779
Norfolk, VA 23501

Dear Mr. Burton:

This is to acknowledge that the Environmental Protection Agency has completed processing the information submitted in your Part A Hazardous Waste Permit Application. It is the Agency's opinion, based on the assumption that the information submitted is complete and accurate, you as an owner or operator of a hazardous waste management facility have met the requirements of Section 3005(e) of the Resource Conservation and Recovery Act (RCRA) for Interim Status. EPA has not verified the information submitted. If it is determined that the information is incomplete or inaccurate, you may be asked to provide additional information or in certain circumstances it may be determined that you do not qualify for interim status. In addition, this notice does not preclude a citizen from taking legal action under the provisions of Section 7002 of RCRA.

A facility not meeting the requirements for interim status under Section 3005 of RCRA may be required to close until such time as a hazardous waste permit is issued. Interim status may also be terminated, according to procedures in 40 CFR Part 124, if the owner or operator fails to furnish additional information which EPA requests in order to process a permit application.

As an owner or operator of a hazardous waste management facility, you are required to comply with the interim status standards as prescribed in 40 CFR Parts 122 and 265 or with State rules and regulations in those States which have been authorized under Section 3006 of RCRA. In addition, you are reminded that operating under interim status does not relieve you from the need to comply with all applicable State and local requirements.

The enclosure to this letter identifies the processes your facility may use, their design capacities, and types of waste your facility may accept during interim status. This information was obtained from the Part A Permit Application. If you wish to handle new wastes, change processes, increase the design capacity of existing processes, or change ownership or operational control of the facility, you may do so only as provided in 40 CFR Sections 122.22 and 122.23.

If you have any questions concerning this letter, please write to the address shown or call Bill Walsh at 215/597-1230.

Sincerely yours,

Shirley D. Bulkin
Shirley D. Bulkin

Chief, Administrative Support Section
Permit Enforcement Branch

Enclosure

CONDITIONS OF OPERATION DURING
INTERIM STATUS

Date Prepared: July 30, 1981

The information shown below is based solely on the information that the owner and operator of this facility submitted in Part A of the Hazardous Waste Permit Application. This is not a determination by EPA that this facility is an environmentally acceptable facility for treating, storing or disposing of the hazardous wastes listed below.

I. Facility name, location, and EPA Identification Number.

Name: Industrial Marine Service Inc.

Location: 1301 Marsh Street
Norfolk, VA 23523

EPA I.D. No.: VAD 04 144 7111

II. EPA considers the following to be the owner or operator of the facility and therefore the person(s) who must comply with the requirements set forth in 40 CFR Parts 122 and 265.

Owner's Name: Mr. J. N. Burton, Jr.

Operator's Name:

III. During the period of interim status, the facility may use only the following processes for treating, storing or disposing of hazardous waste, up to the design capacities that are indicated.

<u>PROCESS</u>	<u>DESIGN CAPACITY</u>
<u>S01</u>	<u>1800 Gals.</u>
<u>S02</u>	<u>20,000 Gals.</u>
<u>S02</u>	<u>68,814 Liters</u>
<u> </u>	<u> </u>
<u> </u>	<u> </u>

IV. During the period of interim status, the facility may handle only the hazardous wastes with the following EPA Hazardous Waste Numbers, and/or solid waste exhibiting hazardous characteristics with the following EPA Hazardous Waste Numbers.

<u>K049</u>	<u>K051</u>	<u>K052</u>	<u>D002</u>	<u> </u>
<u> </u>	<u> </u>	<u> </u>	<u> </u>	<u> </u>
<u> </u>	<u> </u>	<u> </u>	<u> </u>	<u> </u>



UNITED STATES ENVIRONMENTAL PROTECTION AGENCY

REGION III

6TH AND WALNUT STREETS
PHILADELPHIA, PENNSYLVANIA 19106

NOV - 8 1982

CERTIFIED MAIL
RETURN RECEIPT REQUESTED

Mr. James Parker
President
Industrial Marine Service, Inc.
P.O. Box 1779
Norfolk, Virginia 23501

Re: Notice of Violation No. III-83-3-VR
Industrial Marine Service, Inc.
1301 Marsh Street
Norfolk, Virginia
EPA I.D. No. VAD 041447111

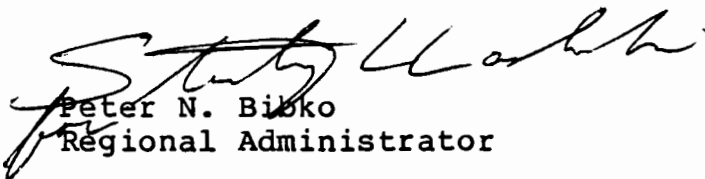
Dear Mr. Parker:

On March 10, 1982, Region III of the U.S. Environmental Protection Agency (EPA) made a formal request for the submission of Part B of your application for a hazardous waste management facility permit under the Resource Conservation and Recovery Act, 42 U.S.C. §§ 6901 et seq. (the Act) for the above facility. The request set September 10, 1982 as the deadline for the submission of the Part B. As of the date of this notice, Industrial Marine Service, Inc. has not submitted its Part B and therefore is in violation of EPA regulations and the Act.

Industrial Marine Service, Inc. must submit the requested Part B as quickly as possible. If it is not submitted within 10 days of receipt of this notice, EPA may take administrative or civil action against Industrial Marine Service, Inc. to require submission or may commence proceedings to terminate interim status for this facility under regulation 40 C.F.R. § 122.22(a)(5). The Act authorizes penalties of up to \$25,000 per day for each violation.

If you have any questions concerning this notice, please contact Ralph W. Siskind, an attorney in the Office of Regional Counsel, at the above address or at (215) 597-8542.

Sincerely yours,


Peter N. Bibko
Regional Administrator



UNITED STATES ENVIRONMENTAL PROTECTION AGENCY

REGION III

6TH AND WALNUT STREETS
PHILADELPHIA, PENNSYLVANIA 19106

Certified Mail
Return Receipt Requested

MAR 18 1982

Mr. John N. Burton, Jr.
Industrial Marine Service, Inc.
P.O. Box 1779
Norfolk, VA 23501

Re: EPA Identification No. VAD 04 144 7111
Facility Name: Industrial Marine Service Inc.
1301 Marsh Street
Norfolk, VA 23523

Dear Mr. Burton:

This letter constitutes a formal request for Part B of your application for a hazardous waste management facility permit under the Resource Conservation and Recovery Act for the facility referenced above. This request is made under the authority of regulation 40 CFR § 122.22(a).

Enclosed for your reference is a list of the items which constitute Part B as applicable to your facility type. These items must be submitted by September 20, 1982. If any of this information is being submitted under a claim of confidentiality, please indicate this fact. (For more information on confidentiality, see regulation 40 CFR Part 2.)

Should you have any questions about these requirements, please contact Ms. Shirley Bulkin on 215/597-4269 or the address shown above. She is in the process of scheduling pre-application briefing meetings to assist applicants in their permit submittal. In order to accommodate and assist you, we need to know of your intent to submit Part B of your permit application within 30 days of your receipt of this letter.

Sincerely yours,

for Stephen R. Wassersug
Director, Air & Waste Management Division

Enclosure: List of Part B Requirements
Part 264 Standards

 EPA GENERAL	U.S. ENVIRONMENTAL PROTECTION AGENCY GENERAL INFORMATION Consolidated Permits Program <i>(Read the "General Instructions" before starting.)</i>	I. EPA I.D. NUMBER <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> F V A D O 4 1 4 4 7 1 1 1 D </div>
LABEL ITEMS I. EPA I.D. NUMBER III. FACILITY NAME V. FACILITY MAILING ADDRESS VI. FACILITY LOCATION	<div style="font-size: 2em; margin-bottom: 10px;">Nov 13 1980</div> <div style="border: 1px solid black; padding: 10px; width: fit-content; margin: 0 auto;"> PLEASE PLACE LABEL IN THIS SPACE </div>	GENERAL INSTRUCTIONS If a preprinted label has been provided, affix it in the designated space. Review the information carefully; if any of it is incorrect, cross through it and enter the correct data in this appropriate fill-in area below. Also, if any of the preprinted data is absent (the area to the left of the label space lists the information that should appear), please provide it in the proper fill-in area(s) below. If the label is complete and correct, you need not complete items I, III, V, and VI (except VI-B which must be completed regardless). Complete all items if no label has been provided. Refer to the instructions for detailed item descriptions and for the legal authorizations under which this data is collected.

II. POLLUTANT CHARACTERISTICS

INSTRUCTIONS: Complete A through J to determine whether you need to submit any permit application forms to the EPA. If you answer "yes" to any questions, you must submit this form and the supplemental form listed in the parenthesis following the question. Mark "X" in the box in the third column if the supplemental form is attached. If you answer "no" to each question, you need not submit any of these forms. You may answer "no" if your activity is excluded from permit requirements; see Section C of the instructions. See also, Section D of the instructions for definitions of bold-faced terms.

SPECIFIC QUESTIONS	MARK "X"			SPECIFIC QUESTIONS	MARK "X"		
	YES	NO	FORM ATTACHED		YES	NO	FORM ATTACHED
A. Is this facility a publicly owned treatment works which results in a discharge to waters of the U.S.? (FORM 2A)		X		B. Does or will this facility (either existing or proposed) include a concentrated animal feeding operation or aquatic animal production facility which results in a discharge to waters of the U.S.? (FORM 2B)		X	
C. Is this a facility which currently results in discharges to waters of the U.S. other than those described in A or B above? (FORM 2C)		X		D. Is this a proposed facility (other than those described in A or B above) which will result in a discharge to waters of the U.S.? (FORM 2D)		X	
E. Does or will this facility treat, store, or dispose of hazardous wastes? (FORM 3)	X			F. Do you or will you inject at this facility industrial or municipal effluent below the lowermost stratum containing, within one quarter mile of the well bore, underground sources of drinking water? (FORM 4)		X	
G. Do you or will you inject at this facility any produced water or other fluids which are brought to the surface in connection with conventional oil or natural gas production, inject fluids used for enhanced recovery of oil or natural gas, or inject fluids for storage of liquid hydrocarbons? (FORM 4)		X		H. Do you or will you inject at this facility fluids for special processes such as mining of sulfur by the Frasch process, solution mining of minerals, in situ combustion of fossil fuel, or recovery of geothermal energy? (FORM 4)		X	
I. Is this facility a proposed stationary source which is one of the 28 industrial categories listed in the instructions and which will potentially emit 100 tons per year of any air pollutant regulated under the Clean Air Act and may affect or be located in an attainment area? (FORM 5)		X		J. Is this facility a proposed stationary source which is NOT one of the 28 industrial categories listed in the instructions and which will potentially emit 250 tons per year of any air pollutant regulated under the Clean Air Act and may affect or be located in an attainment area? (FORM 5)		X	

III. NAME OF FACILITY

1. **SKIP** INDUSTRIAL MARINE SERVICE INC

IV. FACILITY CONTACT

A. NAME & TITLE (last, first, & title)	B. PHONE (area code & no.)
2. BURTON JOHN VICE PRESIDENT	804 543 5718

V. FACILITY MAILING ADDRESS

A. STREET OR P.O. BOX			
3. PO BOX 1779			
B. CITY OR TOWN		C. STATE	D. ZIP CODE
4. NORFOLK		VA	23501

VI. FACILITY LOCATION

A. STREET, ROUTE NO. OR OTHER SPECIFIC IDENTIFIER			
5. 1301 MARSH STREET			
B. COUNTY NAME			
N/A			
C. CITY OR TOWN		D. STATE	E. ZIP CODE
6. NORFOLK		VA	23523
		F. COUNTY CODE (if known)	

VII. SIC CODES (4-digit, in order of priority)

A. FIRST				B. SECOND			
7	7	6	9	9	7	4	4
(specify) Tank Cleaning, Ship				(specify) Oil Spill Cleanup			
C. THIRD				D. FOURTH			
7	4	4	6	9	7		
(specify) Ship Cleaning Except Hold Cleaning				(specify) Hazardous Spill Cleanup			

VIII. OPERATOR INFORMATION

A. NAME										B. Is the name listed in Item VIII-A also the owner?	
INDUSTRIAL MARINE SERVICE INC.										<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	

C. STATUS OF OPERATOR (Enter the appropriate letter into the answer box; if "Other", specify.)										D. PHONE (area code & no.)									
F = FEDERAL M = PUBLIC (other than federal or state) P (specify)										A 8 0 4 5 4 3 5 7 1 8									
S = STATE O = OTHER (specify)																			
P = PRIVATE																			

E. STREET OR P.O. BOX									
P O BOX 1779									

F. CITY OR TOWN										G. STATE										H. ZIP CODE										IX. INDIAN LAND									
B NORFOLK										VA										2 3 5 0 1										Is the facility located on Indian lands?									
																														<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO									

X. EXISTING ENVIRONMENTAL PERMITS

A. NPDES (Discharges to Surface Water)										D. PSD (Air Emissions from Proposed Sources)									
9 N										9 P									
B. UIC (Underground Injection of Fluids)										E. OTHER (specify)									
9 U										0 0 5 4 (specify) POTW Hampton Roads Sanitation Dept.									
C. RCRA (Hazardous Wastes)										E. OTHER (specify)									
9 R										(specify)									

XI. MAP

Attach to this application a topographic map of the area extending to at least one mile beyond property boundaries. The map must show the outline of the facility, the location of each of its existing and proposed intake and discharge structures, each of its hazardous waste treatment, storage, or disposal facilities, and each well where it injects fluids underground. Include all springs, rivers and other surface water bodies in the map area. See instructions for precise requirements.

XII. NATURE OF BUSINESS (provide a brief description)

Industrial Marine Service, Inc. provides a Tank Cleaning and Oil and Hazardous Spill clean up service. Fuel waste is treated and the waste water drained to a POTW Facility under which a permit is issued to IMS. Hazardous Spill waste is collected and stored at our facility until it can be transported to an approved waste disposal facility. In some circumstances this can take over 90 days. Since a Spill can occur at any location the type waste to be handled is not known.

Sometimes simple acids/alkalis are neutralized and discharged to sanitary sewer.

XIII. CERTIFICATION (see instructions)

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this application and all attachments and that, based on my inquiry of those persons immediately responsible for obtaining the information contained in the application, I believe that the information is true, accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

A. NAME & OFFICIAL TITLE (type or print)										B. SIGNATURE										C. DATE SIGNED									
John N. Burton, Jr. VICE PRES										<i>John N. Burton, Jr.</i>										11-19-80									

COMMENTS FOR OFFICIAL USE ONLY

--	--	--	--	--	--	--	--	--	--

7.5 MINUTE SERIES (TOPOGRAPHIC)
SE/4 NEWPORT NEWS 15' QUADRANGLE

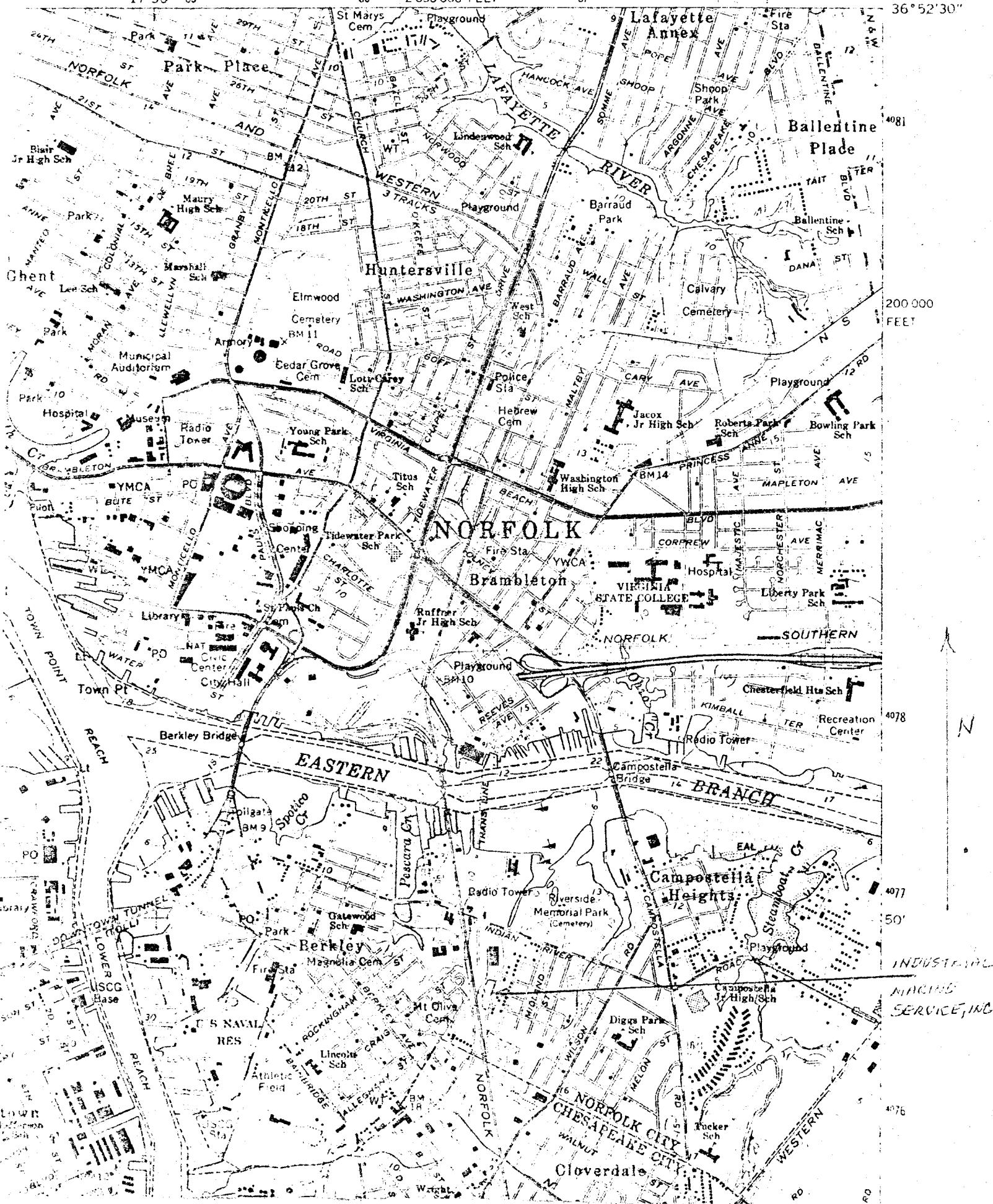
17°30' 385

386

2 650 000 FEET

387

76°15' 36°52'30"



FORM 3		U.S. ENVIRONMENTAL PROTECTION AGENCY HAZARDOUS WASTE PERMIT APPLICATION Consolidated Permits Program <i>(This information is required under Section 3005 of RCRA.)</i>	I. EPA I.D. NUMBER <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> FVAD041447111 T/A C </div>
RCRA			

FOR OFFICIAL USE ONLY		COMMENTS
APPLICATION APPROVED	DATE RECEIVED (yr., mo., & day)	

II. FIRST OR REVISED APPLICATION

Place an "X" in the appropriate box in A or B below (mark one box only) to indicate whether this is the first application you are submitting for your facility or a revised application. If this is your first application and you already know your facility's EPA I.D. Number, or if this is a revised application, enter your facility's EPA I.D. Number in item I above.

A. FIRST APPLICATION (place an "X" below and provide the appropriate date)		<input type="checkbox"/> 2. NEW FACILITY (Complete item below.)	
<input checked="" type="checkbox"/> 1. EXISTING FACILITY (See instructions for definition of "existing" facility. Complete item below.)		FOR NEW FACILITIES, PROVIDE THE DATE (yr., mo., & day) OPERATION BEGAN OR IS EXPECTED TO BEGIN	
YR. <div style="border: 1px solid black; padding: 2px;">8</div>	MO. <div style="border: 1px solid black; padding: 2px;">6</div>	DAY <div style="border: 1px solid black; padding: 2px;">10</div>	FOR EXISTING FACILITIES, PROVIDE THE DATE (yr., mo., & day) OPERATION BEGAN OR THE DATE CONSTRUCTION COMMENCED (use the boxes to the left)
<input type="checkbox"/> 1. FACILITY HAS INTERIM STATUS		<input type="checkbox"/> 2. FACILITY HAS A RCRA PERMIT	

III. PROCESSES – CODES AND DESIGN CAPACITIES

A. PROCESS CODE – Enter the code from the list of process codes below that best describes each process to be used at the facility. Ten lines are provided for entering codes. If more lines are needed, enter the code(s) in the space provided. If a process will be used that is not included in the list of codes below, then describe the process (including its design capacity) in the space provided on the form (Item III-C).

B. PROCESS DESIGN CAPACITY – For each code entered in column A enter the capacity of the process.

1. **AMOUNT** – Enter the amount.

2. **UNIT OF MEASURE** – For each amount entered in column B(1), enter the code from the list of unit measure codes below that describes the unit of measure used. Only the units of measure that are listed below should be used.

PROCESS	PRO- CESS CODE	APPROPRIATE UNITS OF MEASURE FOR PROCESS DESIGN CAPACITY	PROCESS	PRO- CESS CODE	APPROPRIATE UNITS OF MEASURE FOR PROCESS DESIGN CAPACITY
Storage:			Treatment:		
CONTAINER (barrel, drum, etc.)	S01	GALLONS OR LITERS	TANK	T01	GALLONS PER DAY OR LITERS PER DAY
TANK	S02	GALLONS OR LITERS	SURFACE IMPOUNDMENT	T02	GALLONS PER DAY OR LITERS PER DAY
WASTE PILE	S03	CUBIC YARDS OR CUBIC METERS	INCINERATOR	T03	TONS PER HOUR OR METRIC TONS PER HOUR
SURFACE IMPOUNDMENT	S04	GALLONS OR LITERS		T04	GALLONS PER HOUR OR LITERS PER HOUR
Disposal:			OTHER (Use for physical, chemical, thermal or biological treatment processes not occurring in tanks, surface impoundments or incinerators. Describe the processes in the space provided; Item III-C.)		
INJECTION WELL	D79	GALLONS OR LITERS			
LANDFILL	D80	ACRE-FEET (the volume that would cover one acre to a depth of one foot) OR HECTARE-METER			
LAND APPLICATION	D81	ACRES OR HECTARES			
OCEAN DISPOSAL	D82	GALLONS PER DAY OR LITERS PER DAY			
SURFACE IMPOUNDMENT	D83	GALLONS OR LITERS			

UNIT OF MEASURE	UNIT OF MEASURE CODE	UNIT OF MEASURE	UNIT OF MEASURE CODE	UNIT OF MEASURE	UNIT OF MEASURE CODE
GALLONS	G	LITERS PER DAY	V	ACRE-FEET	A
LITERS	L	TONS PER HOUR	D	HECTARE-METER	F
CUBIC YARDS	Y	METRIC TONS PER HOUR	W	ACRES	B
CUBIC METERS	C	GALLONS PER HOUR	E	HECTARES	Q
GALLONS PER DAY	U	LITERS PER HOUR	H		

EXAMPLE FOR COMPLETING ITEM III (shown in line numbers X-1 and X-2 below): A facility has two storage tanks, one tank can hold 200 gallons and the other can hold 400 gallons. The facility also has an incinerator that can burn up to 20 gallons per hour.

<div style="border: 1px solid black; padding: 5px; display: inline-block;"> DUP </div>															
LINE NUMBER	A. PRO- CESS CODE (from list above)	B. PROCESS DESIGN CAPACITY					FOR OFFICIAL USE ONLY	LINE NUMBER	A. PRO- CESS CODE (from list above)	B. PROCESS DESIGN CAPACITY					FOR OFFICIAL USE ONLY
		1. AMOUNT (specify)		2. UNIT OF MEASURE (enter code)						1. AMOUNT		2. UNIT OF MEASURE (enter code)			
X-1	S 0 2	600		G				5							
X-2	T 0 3	20		E				6							
1	S 0 1	200 68,814		L											
2	S 0 1	1800		G				8							
3	S 0 2	20,000		G				9							
4								10							

UNIT OF MEASURE
 must have gallons or liters

III. PROCESSES (continued)

C. SPACE FOR ADDITIONAL PROCESS CODES OR FOR DESCRIBING OTHER PROCESSES (code "T01"). FOR EACH PROCESS ENTERED HERE INCLUDE DESIGN CAPACITY.

Settling, heating, demulsification, neutralization capacity about 12,000 gal. per day. This material will be disposed of in a PONT Facility and will not require an EPA Permit. Permit will be required for Storage as described in paragraph XII of Form 1.

IV. DESCRIPTION OF HAZARDOUS WASTES

A. EPA HAZARDOUS WASTE NUMBER — Enter the four-digit number from 40 CFR, Subpart D for each listed hazardous waste you will handle. If you handle hazardous wastes which are not listed in 40 CFR, Subpart D, enter the four-digit number(s) from 40 CFR, Subpart C that describes the characteristics and/or the toxic contaminants of those hazardous wastes.

B. ESTIMATED ANNUAL QUANTITY — For each listed waste entered in column A estimate the quantity of that waste that will be handled on an annual basis. For each characteristic or toxic contaminant entered in column A estimate the total annual quantity of all the non-listed waste(s) that will be handled which possess that characteristic or contaminant.

C. UNIT OF MEASURE — For each quantity entered in column B enter the unit of measure code. Units of measure which must be used and the appropriate codes are:

ENGLISH UNIT OF MEASURE CODE
POUNDS..... P
TONS..... T

METRIC UNIT OF MEASURE CODE
KILOGRAMS..... K
METRIC TONS..... M

If facility records use any other unit of measure for quantity, the units of measure must be converted into one of the required units of measure taking into account the appropriate density or specific gravity of the waste.

D. PROCESSES

1. PROCESS CODES:

For listed hazardous waste: For each listed hazardous waste entered in column A select the code(s) from the list of process codes contained in Item III to indicate how the waste will be stored, treated, and/or disposed of at the facility.

For non-listed hazardous waste: For each characteristic or toxic contaminant entered in column A, select the code(s) from the list of process codes contained in Item III to indicate all the processes that will be used to store, treat, and/or dispose of all the non-listed hazardous wastes that possess that characteristic or toxic contaminant.

Notes: Four spaces are provided for entering process codes. If more are needed: (1) Enter the first three as described above; (2) Enter "000" in the extreme right box of Item IV-D(1); and (3) Enter in the space provided on page 4, the line number and the additional code(s).

2. PROCESS DESCRIPTION: If a code is not listed for a process that will be used, describe the process in the space provided on the form.

NOTE: HAZARDOUS WASTES DESCRIBED BY MORE THAN ONE EPA HAZARDOUS WASTE NUMBER — Hazardous wastes that can be described by more than one EPA Hazardous Waste Number shall be described on the form as follows:

1. Select one of the EPA Hazardous Waste Numbers and enter it in column A. On the same line complete columns B, C, and D by estimating the total annual quantity of the waste and describing all the processes to be used to treat, store, and/or dispose of the waste.
2. In column A of the next line enter the other EPA Hazardous Waste Number that can be used to describe the waste. In column D(2) on that line enter "included with above" and make no other entries on that line.
3. Repeat step 2 for each other EPA Hazardous Waste Number that can be used to describe the hazardous waste.

EXAMPLE FOR COMPLETING ITEM IV (shown in line numbers X-1, X-2, X-3, and X-4 below) — A facility will treat and dispose of an estimated 900 pounds per year of chrome shavings from leather tanning and finishing operation. In addition, the facility will treat and dispose of three non-listed wastes. Two wastes are corrosive only and there will be an estimated 200 pounds per year of each waste. The other waste is corrosive and ignitable and there will be an estimated 100 pounds per year of that waste. Treatment will be in an incinerator and disposal will be in a landfill.

LINE	A. EPA HAZARD. WASTE NO. (enter code)	B. ESTIMATED ANNUAL QUANTITY OF WASTE	C. UNIT OF MEASURE (enter code)	D. PROCESSES	
				1. PROCESS CODES (enter)	2. PROCESS DESCRIPTION (if a code is not entered in D(1))
X-1	K 0 5 4	900	P	T 0 3 D 8 0	
X-2	D 0 0 2	400	P	T 0 3 D 8 0	
X-3	D 0 0 1	100	P	T 0 3 D 8 0	
X-4	D 0 0 2				included with above

EPA I.D. NUMBER (enter from page 1)													FOR OFFICIAL USE ONLY												
V A D 0 4 1 4 4 7 1 1 1 1													W DUP 2 DUP												
IV. DESCRIPTION OF HAZARDOUS WASTES (continued)																									
LINE NO.	A. EPA HAZARD. WASTE NO. (enter code)				B. ESTIMATED ANNUAL QUANTITY OF WASTE				C. UNIT OF MEASURE (enter code)	1. PROCESS CODES (enter)				2. PROCESS DESCRIPTION (if a code is not entered in D(1))											
	1	2	3	4	5	6	7	8		9	10	11	12	13	14	15	16								
1	K	0	4	9	400			3200 *	g	S	0	1				*	see telecom JULY 16, 1981								
2	K	0	5	1	400			3200 *	g	S	0	1					W/ MR. J. BURTON.								
3	K	0	5	2	90			236,925 *	g	S	0	1													
4	K	0	5	2	1000			2000 *	g	S	0	1													
5	D	0	0	2	20,000			160,000 *	g	S	0	2													
6																									
7																									
8																									
9																									
10																									
11																									
12																									
13																									
14																									
15																									
16																									
17																									
18																									
19																									
20																									
21																									
22																									
23																									
24																									
25																									
26																									

IV. DESCRIPTION OF HAZARDOUS WASTE (continued)

E. USE THIS SPACE TO LIST ADDITIONAL PROCESS CODES FROM ITEM D(1) ON PAGE 3.

EPA I.D. NO. (enter from page 1)

FVAD04144711116

V. FACILITY DRAWING

All existing facilities must include in the space provided on page 5 a scale drawing of the facility (see instructions for more detail).

VI. PHOTOGRAPHS

All existing facilities must include photographs (aerial or ground-level) that clearly delineate all existing structures; existing storage, treatment and disposal areas; and sites of future storage, treatment or disposal areas (see instructions for more detail).

VII. FACILITY GEOGRAPHIC LOCATION

LATITUDE (degrees, minutes, & seconds)

LONGITUDE (degrees, minutes, & seconds)

36 49 50 N

76 16 16 W

VIII. FACILITY OWNER

☒ A. If the facility owner is also the facility operator as listed in Section VIII on Form 1, "General Information", place an "X" in the box to the left and skip to Section IX below.

B. If the facility owner is not the facility operator as listed in Section VIII on Form 1, complete the following items:

1. NAME OF FACILITY'S LEGAL OWNER

2. PHONE NO. (area code & no.)

3. STREET OR P.O. BOX

4. CITY OR TOWN

5. ST.

6. ZIP CODE

IX. OWNER CERTIFICATION

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

A. NAME (print or type)

B. SIGNATURE

C. DATE SIGNED

John N. Burton, Jr.

John N. Burton, Jr.

11/19/80

X. OPERATOR CERTIFICATION

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

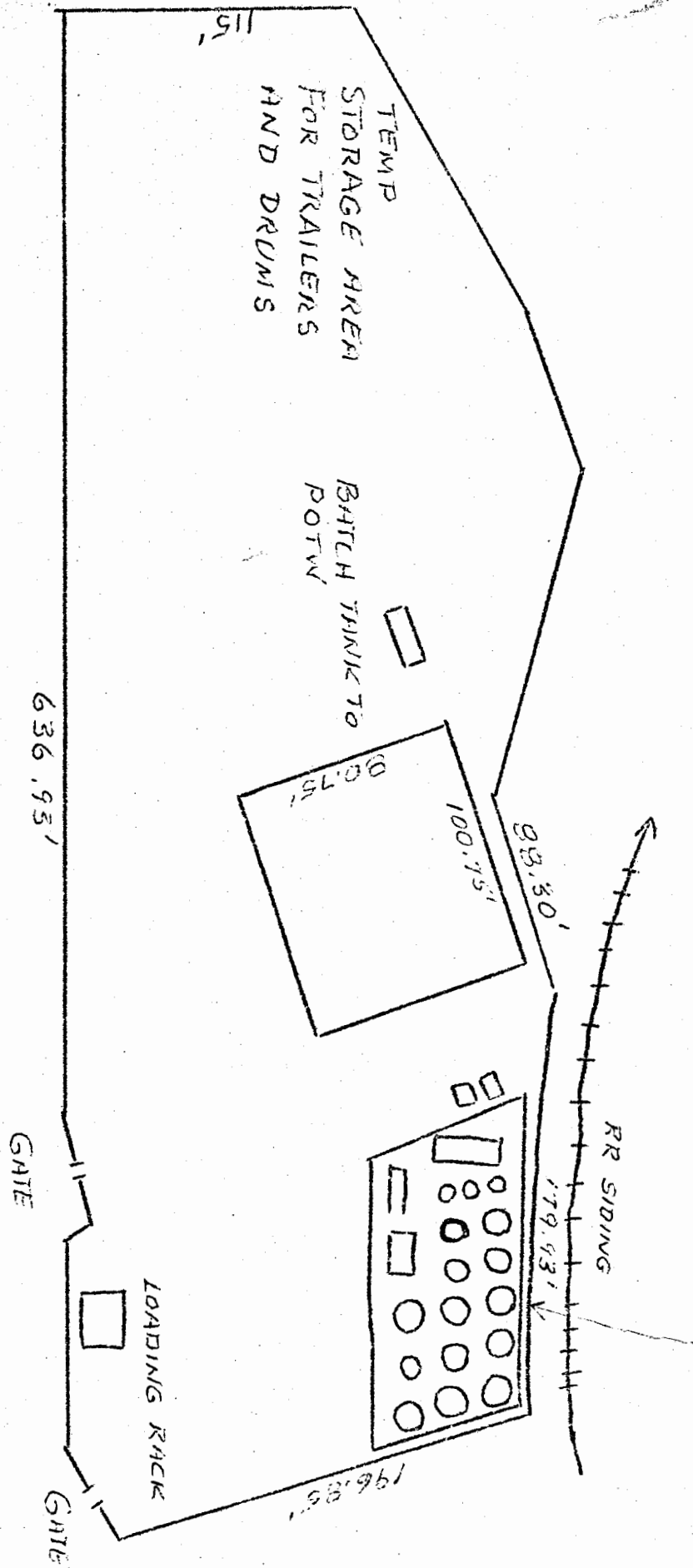
A. NAME (print or type)

B. SIGNATURE

C. DATE SIGNED

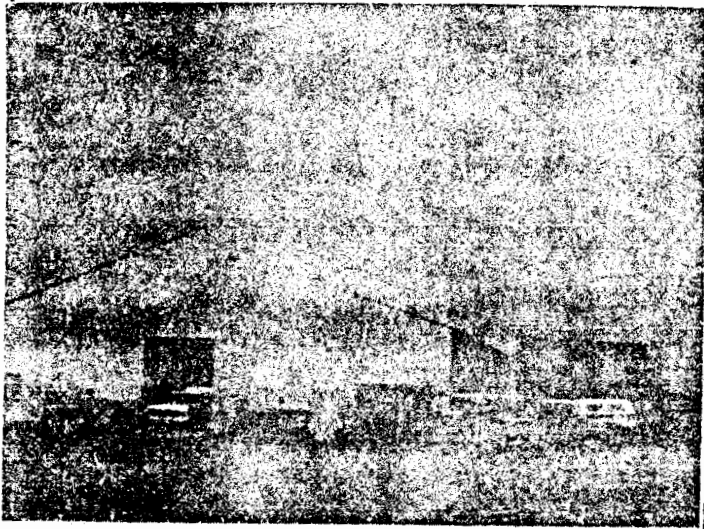
V. FACILITY DRAWING (see page 4)

MARSH ST

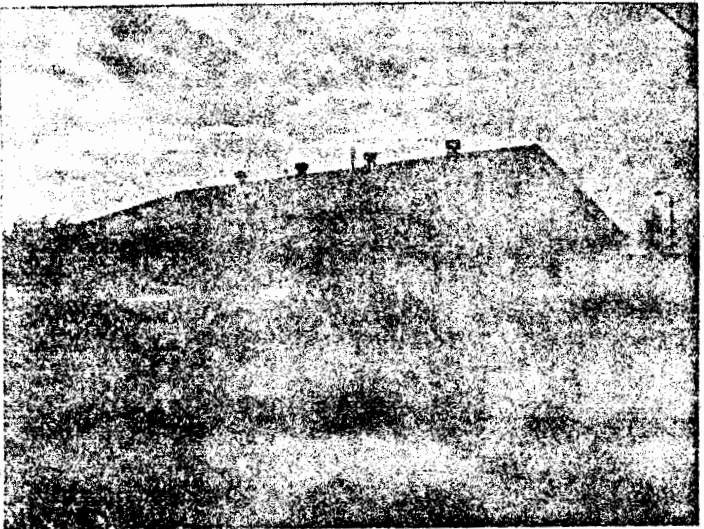


TANK FARM
 13 - 25,000 gal TKS
 3 3,500 gal TKS
 1 14,000 gal COOKER

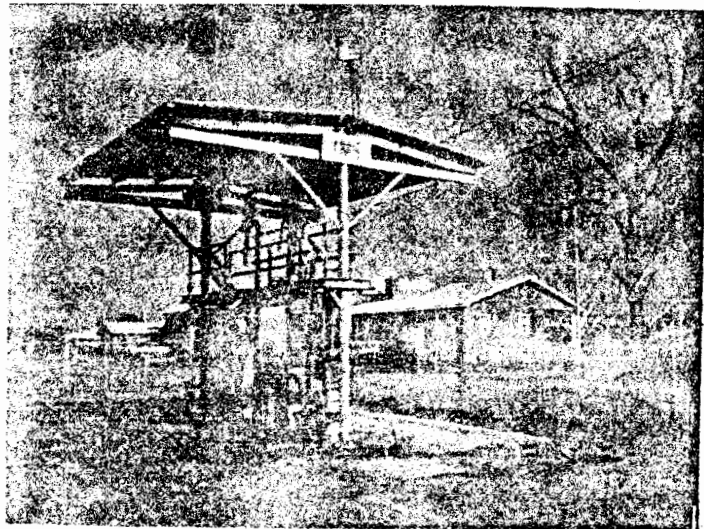
BUILDING FACING S



BUILDING FACING E



LOADING RACK



TANK FARM

